



University of
South Australia

Evaluation Toolkit for South Australian Suicide Prevention Networks

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Introduction: South Australian Suicide Prevention Networks

The [South Australian Suicide Prevention Networks](#) (SPN) are largely facilitated by SA Health through the Office of the Chief Psychiatrist. Some are also facilitated by Wesley LifeForce.

The purpose of the networks is to increase the capacity of communities 'to be suicide aware, able to respond to individuals in suicidal crisis and support those bereaved by suicide.'¹ In this way, the networks contribute to the implementation of the [South Australian Suicide Prevention Plan 2017-2021](#).

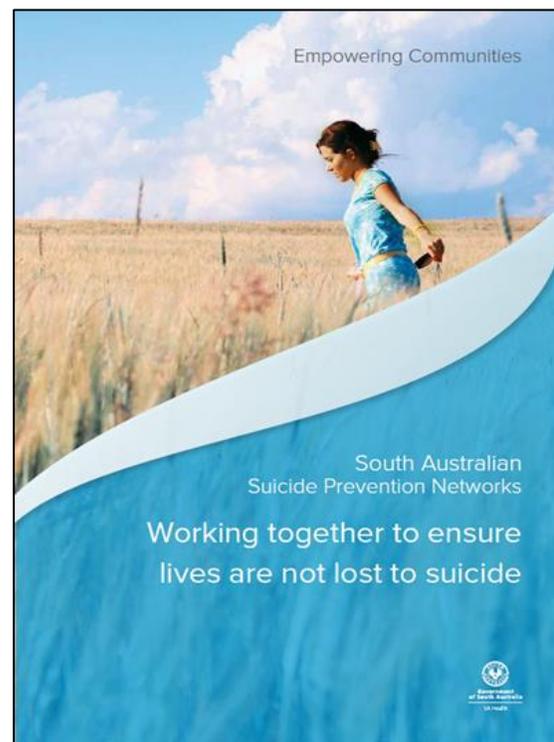
The networks are guided by the following principles:

- Engagement of community
- Local ownership
- Empowering the community
- Local responsiveness
- Utilising all available resources
- Collective impact

Suicide Prevention Networks are formed collaboratively, involving the Office of the Chief Psychiatrist, Local Government, and those in the community who want to prevent suicide. All SPNs develop a Suicide Prevention Action Plan, and take a multipronged approach to address suicide.

This includes stigma reduction, increased community connectedness, and providing education to the community.

The Office of the Chief Psychiatrist endeavours to collaborate with 68 local government entities in South Australia to assist their communities to address suicide at the local level.



¹ Government of South Australia, SA Health. 2016 South Australian Suicide Prevention Networks: Working together to ensure lives are not lost to suicide. Accessed here: <http://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/about+us/department+of+health/mental+health+and+substance+abuse/south+australian+suicide+prevention+networks>.



Suicide Prevention Network Evaluation Toolkit

Purpose and scope

The purpose of this Evaluation Toolkit is to support South Australian SPNs to evaluate their progress and achievement of aims set out in their individualised Suicide Prevention Action Plans. The Evaluation Toolkit aims to help SPNs to identify priorities for evaluation, and the most appropriate steps for undertaking an evaluation.

This resource can be used to support SPNs to collect important information to document the valuable work they are doing, both at the individual and community level. By documenting successes and areas for improvement, the Evaluation Toolkit will also help to guide future action areas. Ideally, SPN committees should discuss and plan for evaluation before new activities are undertaken, to ensure that evaluation is built in from the beginning and that outcomes and success can be measured.

Audience

The Evaluation Toolkit is designed to be used by all South Australian SPNs. It has been specifically designed to support SPNs to conduct a basic evaluation of their activities. Given that SPNs are typically run by busy volunteers, the Evaluation Toolkit has been designed to be brief in nature, to minimise the time needed to use it.

Development of the toolkit

The Evaluation Toolkit was developed in collaboration between the University of South Australia (UniSA) and the Whyalla SPN in 2017. Key actions and evaluation areas for SPNs were identified through a series of interviews and a focus group with past and current Whyalla SPN committee members. Further, a survey of the wider Whyalla SPN was also conducted to confirm and identify additional evaluation areas. From here, staff from UniSA and the Whyalla SPN committee worked together to draft and revise the Evaluation Toolkit.

Benefits of using the Evaluation Toolkit

It is hoped that this Evaluation Toolkit will help South Australian SPNs to:

- Document their reach, effectiveness and achievements;
- Identify areas for improvement;
- Guide their future activities; and
- Share their achievements and learnings with other SPNs in a consistent way.



Using this Evaluation Toolkit

Identifying priorities for evaluation

The first step in undertaking an evaluation begins with identifying priority activities for evaluation. This can be achieved through:

1. Consulting your SPN's Action Plan and identifying key action areas;
2. Discussing action areas within your committee (e.g. during scheduled meetings); and
3. Brainstorming any additional action areas within your committee.

Evaluation of your network's activities is a key priority, and should be seen as an ongoing process – one that both examines the impact of your activities, and drives the design of new activities (Figure 1).

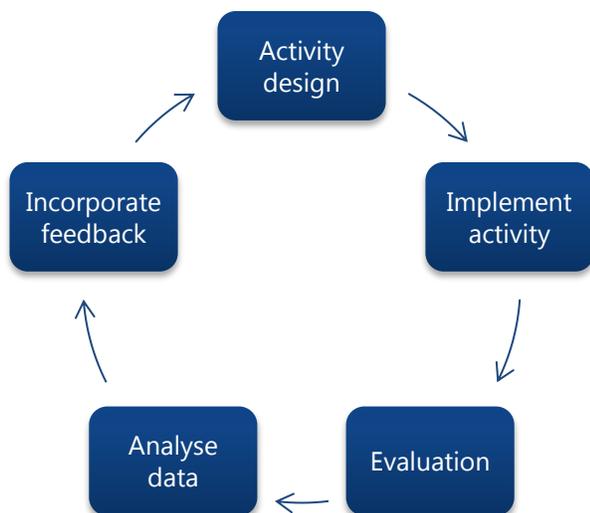


Figure 1. Activity-evaluation cycle

Examples of priority activities:

- Occupying a stall at a local market, fair, open day, etc.;
- Providing financial sponsorship for a local activity;
- Providing funding for individuals to attend suicide prevention/mental health awareness training (e.g. ASIST, Mental Health First Aid);
- Marketing campaigns (e.g. distributing flyers/promotional material for the SPN or another suicide prevention organisation/initiative at a local event);
- Providing information to the community (e.g. suicide prevention or postvention resources);
- Relationships, collaborations and partnerships (e.g. social media, local media, local community organisations, government departments, etc.); and
- Working with and supporting another community organisation event (e.g. R U OK day).



Identify key details of the activity for evaluation

Once evaluation priorities have been decided, careful consideration should be given to identifying key details of the evaluation activity. This will help to select the most appropriate evaluation methodology. Table 1 can be used to assist you to identify the core details of the activity you are wanting to evaluate (see Appendix A for sample evaluation planning template).

Selecting an appropriate evaluation methodology

This Evaluation Toolkit provides examples of various evaluation methodologies. Some activities could be evaluated with multiple methodologies, so it is important to consider

which method is right for you, depending on the activity of interest and the resources you have available to complete the evaluation.

The following evaluation tools and methodologies have been included in this Evaluation Toolkit:

- Quantitative evaluations - surveys
- Qualitative evaluations - interviews and focus groups
- Community connections tracking
- Fundraising tracking

For an additional toolkit related to various suicide prevention activities, see:

- ***Acosta, J.D., Ramcharnd, R., Becker, A., Felton, A., & Kofner, A. (2017). **RAND suicide prevention program evaluation Toolkit. California, USA: RAND Corporation.*****

Table 1. Key details when identifying an activity for evaluation

Evaluation component	Definition	Example
Who	Including age group, gender, occupational group, etc.	Young males (aged 16-24 years)
What	Including specific details about what the activity was, where it occurred and when it happened (including start and end date)	2-hr community-based suicide prevention education session in August 2017
Purpose	Reason for the activity	To reduce the stigma associated with suicide and increase awareness
Outcome	Anticipated outcomes associated with the activity, including immediate, short-term and long-term	Funds raised, contacts made, attitudes towards suicide, stigma, etc.
Evaluation time-frame	Including specific details about the time-frame for evaluation	Pre- and post-training



Quantitative Evaluations - Surveys

Aim

Surveys can be a quick and useful method for gathering information from the community about a range of SPN activities - e.g. before/after a specific event, changes in community attitudes over time, or about experiences with the SPN in general.

Method

Anonymous surveys can be conducted either in-person in hardcopy, or online. The benefits of in-person surveys is that they can be handed out and completed at the same time (e.g. during an SPN AGM). Hardcopy surveys can be distributed and returned by post, but this might mean that many are not returned.

Another option is to use an online survey, created with software such as [SurveyMonkey](#)[®]. Online surveys can be completed on most internet-enabled devices, including smartphones and tablets. This increases the likelihood of responses, and participants do not need to remember to return a survey via post. Online surveys can be emailed directly to participants, as well as advertised on social media.

Surveys can include a range of question types, and often a single survey will include multiple question types. Examples of common question types include:

- Dichotomous question - when you are interested in yes/no responses (e.g. 'Do you feel more confident to talk about suicide?')
- Rating scale questions - when you are interested in responses along a continuum (e.g. 'On a scale of 1 (not at all confident) to 10 (extremely confident), how confident are you to talk about suicide?');
- Open-ended questions - when you are interested in hearing views in participants' own words (e.g. 'Please describe anything that has helped you to feel more confident to talk about suicide');
- Demographic data - it is helpful to obtain some basic demographic data from respondents (e.g. age, gender, occupation) in order to determine the generalisability and relevance of your results (i.e. whether the results represent those of the wider audience).



Once distributed and returned, survey data should be entered into an electronic spreadsheet for data analysis (e.g. Excel). Survey questions can either be created by your committee, or by using examples from past evaluations and research. For example, you might be interested in exploring the impact of an SPN event on participants' attitudes towards suicide. In this case, it would be important to search the literature for scales that measure attitudes towards suicide.

Analysis

Analysis of survey data will depend on the type of questions included. Usually, a basic Excel spreadsheet can be used to calculate frequencies (e.g. *'Ten people stated that they feel more confident to talk about suicide, while five stated that they are not'*), and means/averages (e.g. *'On average, 70% of people were extremely confident to talk about suicide'*).

Responses to open-ended questions can usually be grouped into themes, and can often also be counted (e.g. *'Ten people stated that learning the best questions to ask has helped them to feel more confident to talk about suicide, while five people felt that knowing more about support services was most helpful for them'*).

Additional resources:

- SurveyMonkey®:

<https://www.surveymonkey.com> (Note: there is a free trial for surveys with less than 10 questions and up to 100 responses; larger surveys require the creator to pay for an account).

See Box 1 for an example of survey questions used by the Whyalla Suicide Prevention Network when surveying the local community about their experiences with the network.



Box 1. Sample questions from an online survey conducted by the Whyalla Suicide Prevention Network using SurveyMonkey®

Demographic questions:

1. What is your gender?
 - Female
 - Male
 - Gender diverse
2. What is your age (in years)? _____
3. What is your current work status?
 - Full-time
 - Part-time
 - Volunteer
 - Student
 - Unemployed
 - Retired
 - Other (please specify)
4. What is your occupation? _____
5. What is your postcode? _____

Your experiences with the Suicide Prevention Network (SPN):

1. When did you first hear about the SPN and how did you hear of it?

2. In the last 18 months, which of the following SPN events/activities have you connected with or heard about? (You can select more than one?)
 - Stand up for Mental Health
 - RUOK Day
 - Creating Connecting Communities
 - AGM
 - ASIST
 - Youth Mental Health First Aid
 - Mental Health First Aid
 - Hope for Life "Be There" Workshop
 - World Suicide Prevention Day Fun Run
3. What other events/activities do you think the SPN should conduct in the future, if any?

4. Do you have any suggestions for how the SPN could be improved?

5. Do you have any further comments?



Qualitative Evaluations - Interviews and focus groups

Aim:

Interviews and focus groups can be useful ways of obtaining an in-depth understanding of peoples experiences with the SPN - either in general, or with a specific activity or event.

Method:

The first step is deciding whether interviews or focus groups are more appropriate. One-to-one interviews often allow for a deeper conversation with one person, and can be preferred when discussing topics of a sensitive or controversial nature. However, individual interviews can be time-consuming to conduct. Interviews can be conducted both in-person, via telephone or via the internet (e.g. when the participant and interviewer are geographically distant).

Alternatively, focus groups can be a useful way of gathering information from multiple people in one place, and can potentially lead to a richer conversation, as participants share their views and experiences with each other. Usually between six and eight people is ideal for a focus group. However, focus groups can be challenging to coordinate, as individuals often have conflicting schedules, and require special care to manage if people are expressing differing views. Focus groups are usually best conducted face-to-face. In some instances, you may choose to use a combination of both one-to-one interviews and focus groups.

Regardless of whether interviews and focus groups are your chosen method, there are some common processes that should be followed.

Some key considerations are as follows:

- Interviews/focus groups are best conducted in a mutually convenient and private location, at a mutually convenient time;
- If conducted in-person, it is helpful to provide water and possibly a light refreshment for participants;
- Give participants the option to choose a pseudonym, rather than their actual name, to protect their anonymity and the confidentiality of results;
- Create a list of semi-structured questions prior to the conversation, and use this as a rough guide (note: this may need to be revised after each interview);
- With the consent of participants, audio-record conversations, to ensure that a complete and accurate record is maintained;
- The interviewer can take notes, adding context and observations to the audio-recording (this is particularly useful later, when interpreting the findings).



Analysis:

Depending on the aims of your qualitative evaluation, data analysis will usually involve identifying themes in the interview/focus group conversations. This is often called 'thematic analysis'. The researcher's Braun and Clarke (2006) summarise a six-stage process describing the most common steps in thematic analysis:

1. Data familiarisation: Including transcribing the data, reading and re-reading it, and documenting initial thoughts;
2. Generating initial codes: Coding relevant or interesting features of all of the data;
3. Searching for themes: Combining codes from Step 2 into possible themes, and grouping all data according to these themes;
4. Reviewing themes: Checking that the initial codes and themes match;
5. Defining and naming themes: Updating themes if necessary, and giving each a clear name and definition;
6. Producing the report: Including a summary of key themes, along with sample quotes from participants.

It is often helpful if multiple people (at least 2) are involved in thematic analysis. This allows for different interpretations to be explored and included when deciding and defining themes.

Additional resources:

- Braun, V. & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101.
- University of Auckland. (2017). Questions about thematic analysis. Accessed here: <https://www.psych.auckland.ac.nz/en/about/our-research/research-groups/thematic-analysis/frequently-asked-questions-8.html>.

See Box 2 for an example of interview questions asked of the Whyalla Suicide Prevention Network committee members to understand their experiences of being involved with the network, and to identify priorities for this Evaluation Toolkit.



Box 2. Sample interview questions from a qualitative study with Whyalla Suicide Prevention Network committee members

Demographic questions:

1. What is your gender?
2. What is your age?
3. What is your occupation?
4. What is your work status (e.g. full-time, part-time, etc.)?

Your experiences with the Suicide Prevention Network (SPN):

1. When were you introduced to the SPN? And how did you become aware of it?
2. What made you interested in volunteering for the SPN?
3. Please share in your own words what the SPN does.
4. Please explain your role within the SPN that you are currently connected with.
5. Please describe any cross-over between your role within the SPN and your work in the community (if applicable).
6. Which aspects of the SPN do you believe have contributed to its effectiveness?
7. How can the SPN be improved in the future?
8. What should be the focus/impact of an SPN?
9. Is the SPN currently achieving these aims? If so how?
10. Have you had any specific training around suicide prevention? If yes:
 - a. How long ago was your most recent education and/or training in suicide prevention?
 - b. What were the most significant understandings you took away from the training?
 - c. Which elements of the education/training do you think have contributed the most towards informing you about what can be done to help prevent suicide?
 - d. Please give an example of when this understanding worked well when helping someone in need? Was this person someone in your local community?
11. Do you feel comfortable providing support to a community member at risk of suicide? Have the activities of the SPN contributed to this?
12. How effective have you found the SPN as a community approach to suicide prevention?
13. Do you have any other comments?



Community Connections Tracking

An important focus of SPNs is starting conversations about suicide and mental health with the general public. As such, most SPNs will be interested in tracking their connections with the community, in order to evaluate their reach and impact.

Reach in the community can involve a range of the following:

- Mainstream/local media - including publicity items, such as TV, radio and print media advertisements and/or interviews.
- Social media - including Facebook and Twitter, with metrics (e.g. 'likes', 'shares', 'followers').
- Distribution of promotional materials - including flyers, information sheets, details of support services, etc.

- Presentations, information sessions and other community events (e.g. local markets).
- Community leaders/groups/organisations (e.g. partnerships with key community leaders, schools, businesses).

The following tables (Tables 2-4) can be used to track connections and engagement with the community. As per the fundraising table, these should be added to on an as needs basis, as well as reviewed regularly (e.g. quarterly) to ensure that it is up-to-date and to evaluate changes.

See Box 3 for an example of a feedback form for various events, including seminars and workshops, and Box 4 for an example of a feedback form for brief conversations with the public.

Table 2. Mainstream/local media tracking table

Date of media output	Type of media output (e.g. TV, print, radio)	Name of media source	Title of media output (e.g. article title)	SPN person involved (e.g. person interviewed)	Number of times 'shared'/'liked' on social media



Table 3. Facebook/social media tracking table

Date of evaluation/ media checking	Number of 'followers'	Number of 'posts'	Number of 'shared' posts	Number of people 'talking about' content	Number of 'likes'

Table 4. Presentations/information sessions/other events tracking table

Date of event	Location of event	Number of attendees	Demographic of attendees (e.g. age)	Type and number of materials distributed



Box 3. Sample feedback form for use at various events

[Insert event name here] Feedback Form

We're interested in your experiences with [insert event name here]. Your feedback is important for improving similar events in the future.

1. What was most helpful to you about [insert event name here]?

2. What was least helpful to you about [insert event name here]?

3. Would you attend [insert event name here] again in the future?

- Yes
- No
- Unsure

4. Would you recommend [insert event name here] to your family/friends?

- Yes
- No
- Unsure

5. Do you have any suggestions for how [insert event name here] could be improved?

Thank you for taking the time to complete this brief feedback form.



Box 4. Sample feedback form for brief conversations with the public

[Insert event/location name here] Feedback Form

We're interested in your thoughts about the topic of suicide prevention.

1. After our conversation today, are you more aware about suicide?

- Yes. Please describe one new thing you know about suicide here:

- No
- Unsure

2. After our conversation today, are you more confident to talk to friends/family/others about suicide?

- Yes
- No
- Unsure

3. Would you like to know more about suicide prevention?

- Yes. Please leave your name and contact details here:

- No

Thank you for taking the time to complete this brief feedback form.



Fundraising Tracking

Ongoing tracking and evaluation of funds raised by the SPN is critical for documenting the progress of the committee in this area.

Fundraising should be documented on an as needs basis for all relevant events/opportunities, and ideally should be reviewed regularly (e.g. quarterly) to ensure no activities or donations have been missed.

The following table (Table 5) can be used to track funds. It can also be transferred to an Excel spreadsheet to tally funds and graph changes automatically. This will allow changes in funds over time to be observed.

Table 5. Fundraising tracking table

Date of event/donor	Name of event/donation	Funds raised	Any costs associated with obtaining funds (e.g. event catering)	Total funds raised (funds raised – costs)



Critical Considerations when Conducting Evaluations

Minimising distress

Regardless of the type of methodology chosen for your evaluation, any evaluation involving contact with other people should include careful steps to minimise any distress associated with their participation. This includes:

- Making sure that all participants are aware of the reason for the evaluation and their role in it. Ideally, offer this information in writing, and also describe it in person, where possible;
- Ensuring all participants are given details of appropriate support services (e.g. crisis hotlines, community support services) should they experience any distress associated with their involvement in the evaluation.

Publishing results

If you would like to publish the results of your evaluation in a peer-reviewed format (e.g. an academic journal article), it is important to plan for this before you start your evaluation. In particular, you could consider partnering with an academic organisation (i.e. a university) to ensure that this process is rigorous and so that you can go through an ethics approval process to support the evaluation.

A human research ethics committee will assess the evaluation to ensure that it is sound and minimises distress for those involved.

Information about who to contact at a university can be found on university webpages. You may also have contacts in your area who are associated with academic institutions. If this is not the case, building academic partnerships could also be incorporated into your SPNs Strategic Plan.

Sharing your evaluation with other SPNs

Other SPNs will likely benefit from learning about the results of your evaluation. Consider the best ways to achieve this. Examples include:

- Local and social media
- Newsletters
- Annual Network of Networks event



Appendix A – Template for documenting details of activity for evaluation

Evaluation component	Details
Who	
What	
Purpose	
Outcome	
Evaluation time-frame	